

Table 108

Medicaid Payments per Person Served (Beneficiary), by Basis of Eligibility and Area of Residence: Fiscal Year 1999

Area of Residence	Total	Aged	Disabled	Children ¹	Adults	Other/ Unknown
All Jurisdictions	\$3,819	\$11,268	\$9,832	\$1,282	\$2,104	\$1,532
Boston: Region I	5,317	17,032	13,169	1,697	1,913	544
Connecticut	6,442	22,247	19,390	1,707	1,959	560
Maine	6,674	13,574	13,938	3,017	3,015	960
Massachusetts	4,829	16,711	11,235	1,427	1,829	389
New Hampshire	5,657	13,904	18,399	2,249	2,344	972
Rhode Island	5,472	18,133	14,386	1,410	1,924	842
Vermont	3,248	7,409	10,149	1,482	1,465	744
New York: Region II	7,622	19,975	17,974	1,935	3,858	1,257
New Jersey	5,225	15,156	12,723	1,415	4,510	1,257
New York	8,279	21,126	19,140	2,096	3,738	---
Puerto Rico	---	---	---	---	---	---
Virgin Islands	---	---	---	---	---	---
Philadelphia: Region III	4,141	11,260	9,435	1,493	2,174	1,458
Delaware	4,316	14,761	13,960	1,572	2,267	985
District of Columbia	5,684	19,605	16,220	1,898	2,749	2,252
Maryland	4,940	13,844	14,064	1,816	3,132	994
Pennsylvania	3,946	11,253	7,872	1,534	1,876	256
Virginia	3,592	8,300	8,678	1,116	2,127	779
West Virginia	3,920	12,098	6,834	1,169	1,650	8,904
Atlanta: Region IV	2,929	8,439	6,553	1,068	1,796	1,219
Alabama	3,154	9,772	4,655	745	1,784	7,616
Florida	2,734	9,016	7,652	1,028	1,649	438
Georgia	2,549	7,792	6,135	1,010	2,160	641
Kentucky	3,614	9,902	6,854	1,503	2,119	399
Mississippi	3,119	7,966	5,707	1,114	2,470	266
North Carolina	3,736	8,950	9,233	1,102	2,312	759
South Carolina	3,815	7,269	7,854	1,282	1,291	33,865
Tennessee	2,118	6,595	4,317	969	1,542	46

See footnotes at end of table.

Table 108—Continued

Medicaid Payments per Person Served (Beneficiary), by Basis of Eligibility and Area of Residence: Fiscal Year 1999

Area of Residence	Total	Aged	Disabled	Children ¹	Adults	Other/ Unknown
Chicago: Region V	\$4,406	\$14,711	\$10,566	\$1,234	\$1,956	\$5,821
Illinois	4,297	12,326	13,053	1,389	2,226	4,275
Indiana	4,394	14,715	12,959	1,394	2,068	957
Michigan	3,618	11,054	5,772	824	1,634	17,880
Minnesota	5,408	18,069	16,781	1,708	1,961	1,831
Ohio	4,956	17,148	11,746	1,189	2,051	326
Wisconsin	4,267	14,973	8,128	1,212	1,465	671
Dallas: Region VI	3,218	8,141	8,634	1,214	2,033	1,574
Arkansas	2,927	7,268	6,459	1,312	1,034	655
Louisiana	3,518	8,228	8,042	958	2,314	1,756
New Mexico	3,118	9,347	9,633	1,442	1,998	4,317
Oklahoma	3,078	8,073	8,848	1,161	1,205	3,980
Texas	3,227	8,193	9,434	1,234	2,350	994
Kansas City: Region VII	3,854	12,255	10,486	1,242	1,523	1,151
Iowa	4,413	13,326	10,484	1,370	1,861	1,672
Kansas	4,067	13,079	12,009	1,159	1,595	372
Missouri	3,508	11,335	9,545	1,177	1,251	587
Nebraska	4,065	13,239	12,036	1,413	1,935	4,083
Denver: Region VIII	4,284	12,403	11,459	1,433	1,978	3,870
Colorado	4,568	11,960	11,368	1,715	2,129	1,737
Montana	3,776	13,447	8,674	1,296	2,101	640
North Dakota	5,593	15,584	16,814	1,535	2,049	1,493
South Dakota	4,305	12,695	11,464	1,302	2,234	2,122
Utah	3,657	9,762	11,250	1,132	1,547	7,926
Wyoming	4,313	14,128	13,023	1,234	2,442	115

See footnotes at end of table.

Table 108—Continued

Medicaid Payments per Person Served (Beneficiary), by Basis of Eligibility and Area of Residence: Fiscal Year 1999

Area of Residence	Total	Aged	Disabled	Children ¹	Adults	Unknown
San Francisco: Region IX	\$2,378	\$6,301	\$8,045	\$1,081	\$1,660	\$367
Arizona	2,938	11,972	8,636	1,190	2,229	1,271
California	2,299	5,885	7,992	1,044	1,596	331
Hawaii	2,626	8,774	6,587	1,514	1,519	1,238
Nevada	3,418	7,698	9,296	1,470	2,310	2,208
Seattle: Region X	3,198	9,796	8,090	1,228	2,112	7,134
Alaska	4,736	11,822	14,713	2,625	3,449	1,474
Idaho	4,334	12,364	12,748	1,177	2,985	3,338
Oregon	3,043	9,566	9,383	1,619	1,680	698
Washington	2,985	9,434	6,169	938	2,417	15,207

¹Includes children and foster care children.

NOTES: Beginning fiscal year 1998, capitated premiums for Medicaid eligibles enrolled in managed care plans were included in this series as a Medicaid payment. Also, States process a variety of payments that are not associated with an eligible individual (e.g., disproportionate share payments to hospitals, interim lump-sum provider reimbursement adjustments, and final cost report settlements). These adjustments can be positive (that is, an additional payment to the provider) or negative (that is, a recoupment). Because these payments cannot be associated with any one beneficiary, the eligibility and demographic characteristics for these payments are categorized as other/unknown. Where distributions by basis of eligibility are not provided by the jurisdiction, and where the averages would yield negative or unually large values, the average payments are not shown.

SOURCES: Centers for Medicare & Medicaid Services, Center for Medicaid and State Operations: HCFA Form-2082 (Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services); MSIS; data development by the Office of Research, Development, and Information.